BALLOT QUESTION COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper.	3.This Statement covers From: 05/30/12 To 0	7/22/12		
1. Committee I.D. Number 150415	4. Committee's Mailing Address 3535 Old Kawkaw Bay City, MI 4870	·		
2. Committee Name				
Protect Bangor's Future	Area Code and Phone (989) 686-7680 If the address in this box is different from the committee mailir the Statement of Organization, mail may be sent to this addre official.	ng address on ess by the filing		
5. Treasurer's Name and Residential Address Sheri L. Schuma 2939 Bangor Ro Bay City, MI 487	pad			
Area Code and Phone (989) 684-8182				
6. Treasurer's Business Address 3535 Old Kawkawlin Road Bay City, MI 48706	7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) Richard Donahue 3683 Kawkawlin River Dr. Bay City, MI 48706			
Area Code and Phone (989) 684-7680	Area Code and Phone (248) 330-8574			
8a. PRE-ELECTION OR 8b. POST-ELECTION Pre-Election or Post-Election Statement relates to: PRIMARY GENERAL	8c. ANNUAL STATEMENT (Coverage Year) 8d. QUALIFICATION OR NON-QUALIFICATION STATEMENT (Required of State-wide Ballot Question Committees Only) Date of Qualification or Non-Qualification: 8e. DAMENDMENT TO CAM STATEMENT (Complete Item 8a, 8b, 8c 8c indicate which Statement is being statement in the statement of Statement in the Statement is being indicate which Statement is being indicated which Stat	d, or 8f to ing amended) DMMITTEE olution		
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 4, 5, 6, or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filling deadline of a required campaign statement, that campaign statement can not be waived. 9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete. Current Treasurer or Designated Record Keeper Sheri L. Schumann Type or Print Name Type or Print Name				

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SUMMARY PAGE BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future 4 RECEIPTS Column I Column II This Period Cumulative for Election Cycle 3. Contributions (3a.) <u>\$</u> 6,151.01 a. Itemized Contributions(Schedule 4A, Column 6) b. Unitemized Contributions (3b.) \$ NOT APPLICABLE (less than \$20.01 - no Schedule) (18.) \$ 6,151.01 (3c.) \$ 6,151.01 c. Subtotal of Contributions (4.) \$____ 4. Other Receipts (Schedule 4A-1, Column 6) (19.) \$ _ 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (5.) \$_6,151.01 (20.) \$ 6,151.01 (Add Line 3 c + Line 4) IN-KIND CONTRIBUTIONS 6. In-Kind Contributions a. Itemized In-Kind Contributions (6a.) \$ 180.83 (Schedule 4-IK, Column 7) b. Unitemized (less than \$20.01 each - no Schedule) (6b.) \$ NOT APPLICABLE 7. TOTAL IN-KIND CONTRIBUTIONS (21.) \$ _180.83 (7.) \$ 180.83 (Add Line 6a + Line 6b) **EXPENDITURES** 8. Expenditures (8a.) \$_3,813.77 a. Itemized Direct Expenditures (Schedule 4B, Column 7) b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6) (8b.) \$_ c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7) (8c.) \$_____ d. Unitemized Expenditures (\$50.00 or less-no Schedule) (8d.) \$ ___ (22.) \$ 3,813.77 (8e.) \$ 3,813.77 e. Subtotal of Expenditures (9.) \$____ 9. Independent Expenditures (Schedule 4B-1, Column 7) (23.) \$ __ (24.) \$ 3,813.77 (10.) \$_3,813.77 10. TOTAL EXPENDITURES (Add Line 8e + Line 9) IN-KIND EXPENDITURES 11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 48-2, Column 8) (11.) \$____ (25.) \$_ **DEBTS AND OBLIGATIONS** 12. Debts and Obligations (12a.)\$ ___ a. Owed by the Committee (Schedule 4E) (12b.) \$_ b. Owed to the Committee (Schedule 4E) **BALANCE STATEMENT** 13. Ending Balance of last report filed (13.) \$ 301.00 (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (14.) + 6,151.01(Line 5, Column I, Total Contributions & Other Receipts) (15.) = 6,452.0115. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Line 10, Column I, Total Expenditures) (16.) - 3,813.77 17. ENDING BALANCE (17.) \$ 2,638.24 (Subtract line 16 from line 15)

^{*}If your ending balance is negative, please recheck your math.



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMM	AITTEE 2. Committee	Name Protect Bango	r's Future	+
Please enter contributors name and address. If co middle initial.	ntribution is from an individual, ente	r last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. E Name & Address:	Date of Receipt 05/30/12			
Leitermann, Donna 4072 Richlyn Ct.			\$ <u>1.00</u>	s 1.00
Bay City, MI 48706			Click Here for Me	mo Itemization
5. If over \$100.00 cumulative, please provide:	OF 1 27 12 12 14			
-	oyer Charter Township of	Bangor		
Business Address 180 State Park Dr., Ba	ay City, MI 48706			
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 4. I Name & Address:	Date of Receipt 05/30/12			
Bangor Firefighters Local 1682 1000 W.N. Union			\$ 1000.00	\$_1000.00
Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
	_{oyer} Charter Township of	Rangor	CHER FIELD WICH	io Remization
400 Otata David Du D		- Dangor		
Business Address 180 State Park Dr., E				
Type of Contribution: ✓ Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 4. I Name & Address:	Date of Receipt 06/15/12			
Bublitz, Dawn 3322 E. Gregg Dr. Bay City, MI 48706			<u>\$ 100.00</u>	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
	oyer Charter Township	of Bangor		
Business Address 180 State Park Dr., B	lay City, MI 48706	***************************************		
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 4. E Name & Address:	Date of Receipt 06/15/12			
Donahue, Richard 3683 Kawkawlin River Dr., Bay City, MI 48706			\$ 200.00	s 200.00
5. If over \$100.00 cumulative, please provide:			Click Here for Mer	no Itemization
Occupation Fire Chief Emplo	_{oyer} Charter Township o	f Bangor		
Business Address 180 State Park Dr., Ba	ay City, MI 48706			
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
Page of		Page Subtotal Total of All Schedules 4A on last page of Schedule)	\$1,301.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

I. Committee I.D. Number	150415
i. Committee i.d. Mandel	

BALLOT QUESTION COM	MITTEE 2. Committee Name Protect Bangor	's Future	<u> </u>
Please enter contributors name and address. If committee initial.	ontribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address:	Date of Receipt 06/14/12		
Bangor Homes Non Profit Housing 3325 Alarie Dr. Bay City, MI 48706	g Corp.	_{\$} 100.00	s 100.00
5. If over \$100.00 cumulative, please provide:		Click Here for Mer	no Itemization
	_{oyer} Bangor Homes Housing Corp.		
Business Address 3325 Alarie Dr., Bay	-		
Type of Contribution: Direct	Loan from a person Fund Raiser		
	Date of Receipt 06/20/12		
Bishop, Richard 4193 Sherry Ct.		_{\$} 100.00	_{\$} 100.00
Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:		Click Here for Mem	o Itemization
	_{loyer} Charter Township of Bangor	ORCA FIELD TO MICH	o nemizadon
400 01-1- D-1- D-1			*
Business Address 180 State Park Dr., I	Loan from a person Fund Raiser		
<u></u>	Date of Receipt		
Name & Address:	·		
Davis, Becky 3921 Ranch Dr., Bay City, MI 48706		<u>\$ 300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide:	(Click Here for Mem	o Itemization
Occupation Housewife Emp			
Business Address 3921 Ranch Dr., Bay	City, MI 48706		
Type of Contribution: Direct	Loan from a person Fund Raiser		
3. Contribution # 4 4. Name & Address:	Date of Receipt 06/25/12		
Middleton, Donald			
1112 N. Chilson Bay City, MI 48706		_{\$} _100.01	_{\$} 100.01
5. If over \$100.00 cumulative, please provide:		Click Here for Men	no Itemization
Occupation Reserve Empi	loyer Charter Township of Bangor		
Business Address 180 State Park Dr., B	ay City, MI 48706		
Type of Contribution: Virect	Loan from a person Fund Raiser		
2	Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule)	\$600.01 Enter this total on line 3a of	
, vg~v:		Summary Page	



ITEMIZED CONTRIBUTIONS

Committee	I.D.	Number	150415	

SCHEDULE 4A		
BALLOT QUESTION COMMITTEE 2. Committee Name Protect Bang	or's Future	
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt Name & Address:		, ,
Froncek, Neil 4107 Alexandria Boulevard Bay City, MI 48706	\$ <u>100.00</u>	s <u>100.00</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Trustee Employer Charter Township of Bangor		
Business Address 180 State Park Dr., Bay City, MI 48706		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 07/01/12 Name & Address:		
Sarnowski, Belinda 3939 Bangor Road Box City, MI 49706	\$ 100.00	_{\$} _100.00
Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Phlebotomist Employer Quest Diagnostics		
Business Address 200 S. Wenona St., Bay City, MI 48706		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 4. Date of Receipt 07/02/12 Name & Address:		
Schuch, Scott 605 E. Fulton St.	_{\$} 100.00	_s 100.00
Bay City, MI 48706	". '	*
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Firefighter Employer Charter Township of Bangor		
Business Address 480 State Park Dr., Bay City, MI 48706		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt 07/02/12 Name & Address:		
Susan Kuipers 434 State Park Dr. Bay City, MI 48706	\$ 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	na Itanalaatian
Occupation Owner Employer K&K State Park Grocery	Click here for wei	no nemization
Business Address 434 State Park Dr., Bay City, MI 48706		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtota	\$320.00	
Grand Total of All Schedules 4/	3]
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Page of''	on line 3a of	

Summary Page



ITEMIZED CONTRIBUTIONS

SCHEDULE 4A

BALLOT QUESTION COMMITTEE 2. Committee Name Protect Bange	or's Future	<u> </u>
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt Name & Address: 07/02/12		
Geneseo, Randy 308 N. Eucild Ave. Bay City, MI 48706	\$ 20.00	\$ 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Owner Employer Midas		
Business Address 308 N. Euclid Ave.		
Type of Contribution:		·
3. Contribution # 2 Name & Address: 4. Date of Receipt 06/28/12		
Baranek, Patricia 3052 E. Fisher Rd. Bay City, MI 48706	\$ 20.00	\$ 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Sales Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 3 A. Date of Receipt 06/27/12 Name & Address:		
Bailey, Kenneth State Park Dr. Bay City, MI 48706	\$_100.00	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Fire Marshal Employer Charter Township of Bangor		
Business Address — 180 State Park Dr., Bay City, MI 48706		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt 07/02/12 Name & Address:		
Moore, Jr. Ronald L. 3621 Boyscout Rd., Bay City, MI 48706	s 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Firefighter Employer Charter Township of Bangor		
Business Address 180 State Park Dr., Bay City, MI 48706		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule		
raye	Summary Page	

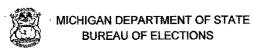


ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number <u>150415</u>

BALLOT QUESTION COMMITTEE 2. Committee Name Prote	ct Bangor's Future	<u> </u>
Please enter contributors name and address. If contribution is from an individual, enter last name, firs middle initial.	st name, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 4. Date of Receipt 06/27/12		
Klowalski, David 823 N. Euclid Ave.	_{\$} 100.00	s 100.00
Bay City, MI 48706 5. If over \$100,00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Owner Employer Euclid Automotive Supply, Inc.		
Business Address 823 N. Euclid Ave., Bay City, MI 48706		
Type of Contribution: Direct Loan from a person Fund Rais	er	
3. Contribution # 2 4. Date of Receipt 06/27/12		
Name & Address: Michael Hayes 505 S. Euclid Ave. Bay City, MI 48706	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation 50.00 Employer Michael Hayes Agency, LLC		
Business Address 505 S. Euclid Ave., Bay City, MI 48706		
Type of Contribution: ✓ Direct Loan from a person Fund Raise	er .	
3. Contribution #3 4. Date of Receipt 06/28/12 Name & Address:	•	
Santos, Pedro 4646 Morningside Dr. Bay City, MI 48706	_{\$} 100.00	ş 100.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Electrician Employer General Motors		
Business Address 1001 Woodside Ave. Bay City, MI 48708		
Type of Contribution: ✓ Direct Loan from a person Fund Raise	r	
3. Contribution #4 4. Date of Receipt 06/20/12 Name & Address:		
Leitermann, Donna 4072 Richlyn Ct., Bay City, MI 48706	_{\$} 100.00	s_101.00
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Treasurer Employer Charter Township of Bangor		
Business Address 180 State Park Dr., Bay City, MI 48706		
Type of Contribution: 🗸 Direct Loan from a person Fund Rai	iser	
Grand Total of All Sci (Complete on last page of		
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Page



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

BALLUI QUESTION COM	2. Committee Nar	ne Frotect bangor	STULUIE	<u> </u>
Please enter contributors name and address. If comiddle initial.	ontribution is from an individual, enter las	t name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 4. Name & Address:	Date of Receipt 06/28/12			
Weiss, Randy 363 Hotchkiss Rd. Bay City, MI 48706			\$ 75.00	\$ 75.00
5. If over \$100.00 cumulative, please provide:			Click Here for Mer	no itemization
Occupation Owner Emp	_{oyer} Splash-N-Dash, Inc			
Business Address 363 Hotchkiss Rd., B	ay City, MI 48706			
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 2 4. Name & Address:	Date of Receipt 06/27/12			
Schultz, Jon 8 State Park Dr.			\$ <u>100.00</u>	\$_100.00
Bay City, MI 48706			Click Here for Mem	o Itemization
5. If over \$100.00 cumulative, please provide: Occupation OWNET Emp	loyer The Bier Garten, Inc.		CHCK HEIG IOI WIGH	o nemzatori
Business Address 8 State Park Dr., Ba	y City, MI 48706			
Type of Contribution: Direct		Fund Raiser		
Contribution # 3 Name & Address: 4.	Date of Receipt 07/01/12	······································		
Eagle, Howard 3642 State Street Rd. Bay City, MI 48706			_{\$} _100.00	s 100.00
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
Occupation 100.00 Em	oloyer Charter Township of E	3angor		
Business Address — 180 State Park Dr., I	Bay City, MI 48706			
Type of Contribution: Direct	Loan from a person	Fund Raiser		· · · · · · · · · · · · · · · · · · ·
3. Contribution # 4 4. Name & Address:	Date of Receipt 07/02/12			
Laroque, Sharon 3800 S. Huron Bay City, MI 48706			_{\$} _50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
Occupation Owner Emp	loyer Bay Cycle		CHICK HELE TO IME	io nemizanor
Business Address 3800 S. Huron, Bay	City, MI 48708			
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
6		Page Subtotal al of All Schedules 4A last page of Schedule)	\$325.00	
Pageof			on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number 150415

Name & Address: Willard, Michael 3741 Wilder Rd., Suite D Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Mike Willard Insurance Agency Business Address 3741 Wilder Rd., Suite D, Bay City, MI 48706 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 2 Name & Address: Hunt, Jeff 4359 Wilder Rd. Bay City, MI 48706
middle initial. A. Date of Receipt 06/29/12 Name & Address: Willard, Michael 3741 Wilder Rd., Suite D Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Mike Willard Insurance Agency Business Address 3741 Wilder Rd., Suite D, Bay City, MI 48706 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 A. Date of Receipt 07/02/12 Name & Address: Hunt, Jeff 4359 Wilder Rd. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Deff Hunt Agency Business Address 4359 Wilder Rd., Bay City, MI 48706 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 A. Date of Receipt 07/02/12 Albay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Deff Hunt Agency Business Address 4359 Wilder Rd., Bay City, MI 48706 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 4. Date of Receipt 07/02/12
Name & Address: Willard, Michael 3741 Wilder Rd., Suite D Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Mike Willard Insurance Agency Business Address 3741 Wilder Rd., Suite D, Bay City, MI 48706 Type of Contribution:
3741 Wilder Rd., Suite D Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Mike Willard Insurance Agency Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 2
5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Mike Willard Insurance Agency Business Address 3741 Wilder Rd., Suite D, Bay City, MI 48706 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 4. Date of Receipt 07/02/12 Name & Address: Hunt, Jeff 4359 Wilder Rd. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Jeff Hunt Agency Business Address 4359 Wilder Rd., Bay City, MI 48706 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 4. Date of Receipt 07/02/12
Occupation Owner Business Address 3741 Wilder Rd., Suite D, Bay City, MI 48706 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 2 Name & Address: Hunt, Jeff 4359 Wilder Rd. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Mike Willard Insurance Agency Fund Raiser 4. Date of Receipt 07/02/12 \$ 100.00 \$ 100.00 Click Here for Memo Itemization Click Here for Memo Itemization Fund Raiser \$ 100.00 \$ 100.00 Fund Raiser Address 4359 Wilder Rd., Bay City, MI 48706 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 4. Date of Receipt 07/02/12
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 Name & Address: Hunt, Jeff 4359 Wilder Rd. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Jeff Hunt Agency Business Address Type of Contribution: Direct Loan from a person Fund Raiser 4. Date of Receipt 07/02/12 S 100.00 \$ 100.00 Click Here for Memo Itemization Click Here for Memo Itemization Fund Raiser A 100.00 \$ 100.00 Fund Raiser Click Here for Memo Itemization Fund Raiser A 100.00 \$ 100.00 Click Here for Memo Itemization
Type of Contribution:
Name & Address: Hunt, Jeff 4359 Wilder Rd. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Jeff Hunt Agency Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 4. Date of Receipt 07/02/12
4359 Wilder Rd. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Owner Business Address Type of Contribution: One of Receipt 07/02/12 \$ 100.00 \$ 100.00 Click Here for Memo Itemization Fund Raiser
5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Discret Loan from a person 3. Contribution # 3 Click Here for Memo Itemization Fund Raiser
Business Address Type of Contribution: Direct Loan from a person 4359 Wilder Rd., Bay City, MI 48706 Loan from a person Fund Raiser 4. Date of Receipt 07/02/12
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 4. Date of Receipt 07/02/12
3. Contribution #3 4. Date of Receipt 07/02/12
IMAINIE & AUGICESS.
Thelen Auto Group 1112 N. Euclid Ave. 8 100.00 \$ 100.00
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation Employer Thelen Auto Group
Business Address 1112 N. Euclid Ave., Bay City, MI 48706
Type of Contribution: Direct Loan from a person Fund Raiser
3. Contribution # 4 4. Date of Receipt 07/02/12 Name & Address:
DeVolder, Fay 3010 E. Midland Rd. Bay City, MI 48706 \$ 100.00 \$ 100.00
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation 100.00 Employer Tony E. DeVolder
Business Address 3010 E. Midland Rd., Bay City, MI 48706
Type of Contribution: ✓ Direct Loan from a person Fund Raiser
Page Subtotal \$350.00 Grand Total of All Schedules 4A
(Complete on last page of Schedule) Enter this total

Summary Page



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

2. Committee Name 1 Totel Dang	JI S FULUIC	
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 4. Date of Receipt 07/02/12	**····································	auto 011000 pt/
K & B Truck & Trailer, LLC Feinauer, Ben 3861 N. Euclid Bay City, MI 48706	_{\$} 20.00	s 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Owner Employer K & B Truck & Trailer, LLC		
Business Address 3861 N. Euclid, Bay City, MI 48706		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 4. Date of Receipt 07/02/12 Name & Address:		
Gilles, Pete 366 State Park Dr., Bay City, MI 48706	<u>\$ 20.00</u>	ş 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for Men	o Itemization
Occupation Owner Employer Gilles Glass & Mirror		io nomentor
Business Address 366 State Park Dr., Bay City, MI 48706		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #3 4. Date of Receipt 07/05/12 Name & Address:		
MI Professional Fire Fighters Union		
1651 Kingsway Ct., Suite E Trenton, MI 48183	\$ 1500.00	_{\$} 1500.00
5. If over \$100.00 cumulative, please provide:	College Advantage of the Advantage	
Union MI Destruction of The Time to the	Click Here for Mem	o itemization
1651 Kingsway Ct Suite F Trenton MI 48183		
3. Contribution # 4 Name & Address: Loan from a person Fund Raiser 4. Date of Receipt 07/03/12		
Davies, Randall 349 State Park Dr.,	E0.00	E0 00
Bay City, MI 48706	s 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Owner Employer Pleasurecraft Outfitters		
Business Address 349 State Park Dr., Bay City, MI 48706		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal	\$1,590.00	
Grand Total of All Schedules 4A (Complete on last page of Schedule)		
Page of	Enter this total	
	on line 3a of Summary	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COM	AITTEE 2. Committee Nam	e Protect Bangor	s Future	E
Please enter contributors name and address. If comiddle irritial.	ntribution is from an individual, enter last	name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address:	Date of Receipt 07/02/12			
Hardy, Patrick 3389 S. Huron Bay City, MI 48706		:	100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
	over J. P. Discount			
Business Address 3389 S. Huron Bay C	·	 		
Type of Contribution: Direct		und Raiser		
	Date of Receipt 07/03/12			
Watson, Terry 93 River Trail Dr.		5	100.00	_{\$} _100.00
Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:		,	Click Here for Memo	temization
•	_{oyer} Charter Township of Ba		DROK HELE IOT METER	nemzaron
400 Ct-t- Dawle Day		957		
Business Address Type of Contribution: Tour State Park Dr., to Direct		und Raiser		
	Date of Receipt 07/10/12			
Name & Address:				
Hoppe, Jill 4030 Allen Ct. Bay City, MI 48706			<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		(Dick Here for Memo	Itemization
Occupation Teller Emp	_{lover} FinancialEdge			
1195 S. Euclid Ave	•			
Business Address Type of Contribution: Direct	Loan from a person Fu	ınd Raiser		
	Date of Receipt 07/11/12			
Name & Address: Schisler, Scott				
4484 W. Park Dr. Bay City, MI 48706			_{\$} _100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
Occupation Trustee Empi	oyer Charter Township of Ba			
Business Address 180 State Park Dr., B	ay City, MI 48706			
Type of Contribution: Virect	Loan from a person	Fund Raiser		
		Page Subtotal	\$400.00	
		of All Schedules 4A		
9 11	(Complete on la	st page of Schedule)	Enter this total	
Pageof			on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMI	AITTEE 2. Committee 1	lame Protect Bangor	's Future	+
Please enter contributors name and address. If comiddle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address:	Date of Receipt 07/07/12			
Sarnowski, Jerome 1400 S. Warner St. Bay City, MI 48706			\$ <u>25.00</u>	ş <u>25.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Men	o Itemization
Occupation Retired Empl	byer			
Business Address		······		
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 2 4. Name & Address:	Date of Receipt 07/13/12			
Rivet, Joseph 2600 Center Ave.			\$ 50.00	\$ 50.00
Bay City, MI 48706			Click Here for Mem	a Itamization
5. If over \$100.00 cumulative, please provide: Occupation Drain Commissioner Empl	_{oyer} County of Bay		Olice Here for Well	J REMIZATION
Business Address 515 Center Ave., Ba	y City, MI 48706			
Type of Contribution: Virect	Loan from a person	Fund Raiser		
3. Contribution # 3 4. Name & Address:	Date of Receipt 07/12/12			
Jacobs, Jon 4714 Gerald St. Bay City, MI 48706			_{\$} 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide:			Click Here for Memo	Itemization
Occupation Firefighter Emp	_{loyer} Charter Township of	Bangor		
Business Address 180 State Park Dr., E	Bay City, MI 48706			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 4. Name & Address:	Date of Receipt 07/16/12			
Willett, Floyd 3406 Hidden Rd. Bay City, MI 48706			\$_100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
Occupation Retired Empl	oyer			
Business Address				
Type of Contribution: ✓ Direct	Loan from a person	Fund Raiser		
Page of		Page Subtotal otal of All Schedules 4A on last page of Schedule)	\$275.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415	
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BALLOT	QUESTION COMM	SITTEE 2. Commit	ee Name Protect Bango	or's Future	
Please enter contributors middle initial.	name and address. If co	ntribution is from an individual, er		6, Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Bay	4.t City Fire Union	Pale of Receipt 07/18/12			
IAFF Local 116 PO Box 272	•			_{\$} 250.00	_{\$} 250.00
Bay City, MI 487				Click Here for Me	mo Itemization
Occupation Union	Emplo	yer City of Bay City			
Business Address 301	Washington Ave.	Bay City, MI 48768			
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4, 1	Date of Receipt <u>07/16/12</u>			· · · · · · · · · · · · · · · · · · ·
Tomaszewski, Jay 2025 Hatch Rd Bay City, MI 4870				s 100.00	ş_100.00
5. If over \$100.00 cumula				Click Here for Men	na lternization
Occupation Firefighte	•	yer Charter Township	of Bangor	whole train for the	io nemicanon
* ***		ay City, MI 48706			
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 3	4, [Pate of Receipt 07/14/12			in the second se
Name & Address: Seymour, Mark					
2817 2 Mile Rd.				_s 50.00	_s 50.00
Bay City, MI 48706	3				3
5. If over \$100.00 cumul Purchasii Occupation	ative please provide: ng/IT Mahager Emplo	wer Metro Fabricating		Click Here for Mem	c Itemization
1650	Tech Dr., Bay C	· · · · · · · · · · · · · · · · · · ·			
DUSINESS Address	Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:		ate of Receipt		*************************************	
Name & Address:	~~	4			
				\$	\$
5. If over \$100.00 cumulat	tive, please provide:			Click Here for Men	no Iternization
Occupation	Emplo	yer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
			Page Subtotal	\$400.00	
ند ند			d Total of All Schedules 4A te on last page of Schedule)	\$6,151.01	
Pageof			, ,	Enter this total on line 3s of Summary Page	ı



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 4-IK BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 150415

line 6a of Summary Page

BALLOT QUESTION COMMITTEE	2. Committee Name Protect Bangor's Future		
Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: Bay County Democratic Party PO Box 556 Pinconning, MI 48650 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Bulk Stamp Permit 5. DATE OF RECEIPT: 06/07/12 6. VENDOR NAME & ADDRESS:	\$ 19.00	\$ 19.00
Contribution #2 Name & Address: Home Depot 3860 State Street Bay City, MI 48706 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. □Loan endorsement or guarantee	\$_161.83 Click Here for Memo Ite	\$ 161.83
Fund Raiser Contribution #3 Name & Address: if over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description 5. DATE OF RECEIPT: 6. VENDOR NAME & ADDRESS:	\$Click Here for Memo Itel	\$mization
Fund Raiser	Page Subtotal Grand Total of all Schedules 4-lik (Complete on last page of Schedule)	\$180.83 \$180.83	



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

BALLOT QUESTION COMMITTEE 2. C	ommittee Name Protect Bangor's	Future			
3. Name and address of person to whom paid	State purpose of expenditure. Identify the ballot proposal involudicate whether supported or oppose.	olved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:				
	Yard Signs				
Stanley Sawicki & Son, Inc. 1521 W. Lafayette		o	7/02/12	, 376.30	,376.30
Detroit, MI 48216	5. Ballot Proposal:		Date of	\$ 0.00	\$ 0.0.00
	Fire Millage Renewal	<u> </u>	xpenditure		
	0 D		Click for	r Memo Itemization	Tyne
Check box if expenditure is payment of debt or obligation reported on previous statement	County:Bay	<u> </u>	2,(3)(13)		.,,,,,
r-1	(Tarrey	Oppose	-		
Fund Raiser Expenditure # 2	Statewide 4. Purpose:	Local			
Name & Address:	Millage Flyer				
Bellsmith Graphic Design					
1001 Center Ave., Suite 207	5. Ballot Proposal:		07/02/12	_{\$} 963.88	s 963.88
Bay City, MI 48708	Fire Millage Renewal		Date of	Ψ	. •
;	o Day	Ex	cpenditure		
	County: Bay	·· ···	Click for	Memo Itemization	Tvne
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose			. , , , ,
Fund Raiser	Statewide	Local			
Expenditure # 3	4. Purpose:				
Name & Address:	Mailing Labels				
Bangor Township	5. Ballot Proposal:		7/11/12	_s 17.98	. 17.98
180 State Park Drive	-		Date of	\$ 17.50	\$ 17.50
Bay City, MI 48706	Fire Millage Renewa	(I ; E)	cpenditure		
	County: Bay		Click for	Memo Itemization	Tvne
Check box if expenditure is payment of debt or obligation		70,,,,,	Citoti Ioi		,,,,,
reported on previous statement	✓ Support	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 4 Name & Address:	4. Purpose:				
Northeastern Paint	Paint Supplies	·	7/44/40	105.44	105.44
3950 N. Euclid	5. Ballot Proposal:		07/11/12	_{\$} 195.44	_s 195.44
Bay City, MI 48706	Fire Millage Renewa	31	Date of openditure		
					_
 	County: Bay		Click to	r Memo Itemization	Type
Check box if expenditure is payment of debt or obligation reported on previous statement	✓ Support	Oppose			
		Local			
Fund Raiser	□ Jorgrewine 4				T
		Subtotal	I this page	\$1,553.60	
		nd Total of Sch on last page of			
	(Complete of	ııı ıası pay e 01	Conedule)	Enter this total	_}
1 2				on Line 8a of	
Page of3				the Summary Page	



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

BALLOT QUESTION COMMITTEE

. Committee I. D. Number	150415

	Committee Name Protect E	langor's Future			
3. Name and address of person to whom paid	State purpose of expose. Identify the ballot propose indicate whether support	osal involved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:				
US Postmaster	Postage				
Bay City, MI 48708	6 Dellet Description	· · · · · · · · · · · · · · · · · · ·	07/12/12	_s 173.05	, 173.05
	5. Ballot Proposal: Fire Millage Re	nowal	Date of	\$	- \$
	i ile ivillage Ne	ITEWAI	Expenditure		
Check box if expenditure is payment of debt or obligation	County:Bay	•	Click fo	or Memo Itemizatio	п Туре
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 2 Name & Address:	4. Purpose:	——————————————————————————————————————			W
US Postmaster	Postage				
Bay City, MI 48708	5. Ballot Proposal:		07/12/12	45 OO	210 50
	Fire Millage Rei	newal		\$ 45.00	_{_ s_} 218.50
			Date of Expenditure		
——————————————————————————————————————	County: Bay		00.1.6		_
Check box if expenditure is payment of debt or obligation reported on previous statement	✓ Support	Oppose	Click for	Memo Itemization	Туре
Fund Raiser	Statewide	Local			
Expenditure # 3	4. Purpose:	V LOOM		···	
Name & Address:	Paint Supplies				
Northeastern Paint	5. Ballot Proposal:		07/13/12	22.04	240 20
3950 N. Euclid Bay City, MI 48706		newol	Date of	_{\$} 22.94	\$ <u>218.38</u>
Day Oity, 1911 40700	Fire Millage Re	ilewai	Expenditure		
	County: Bay		Click for	Memo Itemization	Type
Check box if expenditure is payment of debt or obligation	✓ Support	Oppose			.31
reported on previous statement Fund Raiser	Statewide				
Expenditure # 4	4. Purpose:	✓ Local	······································	,	
Name & Address:	Tee-Shirts				
Sandlot Sports			07/19/12	_s 286.73	_{\$} 286.73
1221 Salzburg Ave. Bay City, MI 48706	5. Ballot Proposal:		Date of	\$	_ \$
bay City, Wi 40700	Fire Millage Re	newai	Expenditure		
-	County: Bay		Click for	Memo Itemization	Туре
Check box if expenditure is payment of debt or obligation	Support	По			
reported on previous statement		Oppose			
Fund Raiser	Statewide	✓ Local			
		Subte	otal this page	\$527.72	
		Grand Total of S			-
	(Con	iplete on last page	of Schedule)		1
2 2 ·				Enter this total on Line 8a of	
$a_{age} 2 of 3$	•			the Summary Page	



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

BALLOT QUESTION COMMITTEE

1. Committee I. D. Number_	150415		
out	·····	 	

Name and address of person to whom paid	4. State purpose of expe		6. Date	7. Amount	8. Cumulative
and parado of parado to this in paid	5. Identify the ballot prop Indicate whether suppor	oosal involved.	U. Date	r. Amount	for election
Expenditure # 1	4. Purpose:				
Name & Address:	Paint Supplies	<u>.</u>			
Donna Leitermann	i anti ouppiles	,	07/13/13	42.40	40.40
4072 Richlyn Ct.	5. Ballot Proposal:			_{\$} 13.10	_{_ \$} 13.10
Bay City, MI 48706	Fire Millage Re	newal	Date of Expenditure		
Check box if expenditure is payment of debt or obligation	County: Bay		Click fo	or Memo Itemizatio	n Type
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 2	4. Purpose:			· · · · · · · · · · · · · · · · · · ·	·
Name & Address:	Paint Supplies				
Michael Sarnowski	5. Ballot Proposal:				
3939 Bangor Road	•	nowol	07/13/12	_{\$} 6.14	_{\$} 6.14
Bay City, MI 48706	Fire Millage Re	i lewai	Date of		<u> </u>
	County: Bay		Expenditure		
	County: Day		Click for	r Memo Itemization	Type
Check box if expenditure is payment of debt or obligation reported on previous statement	✓ Support	Oppose			.,,,
Fund Raiser	Statewide	Local			
Expenditure # 3	4. Purpose:	<u> </u>			
Name & Address:	Stencil				
Klender Design			07/40/40	60.00	00.00
3791 E. Wilder Road	5. Ballot Proposal:		07/13/12	_{\$} 60.00	_{\$} 60.00
Bay City, MI 48706	Fire Millage Re	newal	Date of		
	_		Expenditure		
	County: Bay		Click fo	r Memo Itemization	Туре
Check box if expenditure is payment of debt or obligation reported on previous statement	✓ Support	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 4	4. Purpose:	<u>IV</u>	_		·····
Name & Address:	Millage Flyer				
Bellsmith Graphic Design			07/16/12	1653.21	. 2617.09
1001 Center Ave., Suite 207	5. Ballot Proposal:			\$ 100012.	\$ 2011100
Bay City, MI 48708	Fire Millage Re	newal	Date of Expenditure		
				or Memo Itemization	a Tima
	County: Bay		CHEKIC	n Memo Remizado	ı ıybe
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose			
· · ·	Statewide				
Fund Raiser	Statewide	✓ Local			1
		Subt	otal this page	\$1,732.45	
		Grand Total of		\$3,813.77	7
	(Co	mplete on last page	of Schedule)		
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